

MONTANA BOARD OF ATHLETICS

301 So Park Ave, 4th Floor
PO Box 200513
Helena MT 59620-0513
Phone: (406) 841-2334 Fax: (406) 841-2309
E-MAIL: dlibsath@mt.gov
WEBSITE: <http://www.athleticboard.mt.gov>

APPLICATION PROCEDURES FOR:

PROMOTER/MATCHMAKER

ILLEGIBLE AND INCOMPLETE APPLICATIONS WILL BE RETURNED.

(Please allow 14 days for processing from the date that the Board receives your complete routine application)

LICENSE REQUIREMENTS

- APPLICATION:** Submit a completed application at least 30 days prior to an event. All applications must be notarized. A promoter license must be issued, before sanction of an event will be granted.
- FEES:** \$500 license fee payable to the Montana Board of Athletics. All fees are non-refundable. (Club Boxing Promoter \$250)
- RENEWAL:** All licenses expire on June 30 of each year.
- PHOTO:** Must submit a full-face photograph of head and shoulders.
- SANCTION:** An event must be sanctioned at least 21 days prior to the event. An application for Board sanction must be completed for each individual event throughout the year. No advertising is to be distributed until an event has been sanctioned.
- SURETY BOND:** Submit a \$5,000 Surety Bond.
- GROSS REVENUE:** Submit projection of gross revenue for any planned event(s).
- LAWS & RULES:** Licensees are required to know and adhere to the laws and rules pertaining to the Montana Board of Athletics. Current statutes and rules are located on the Board's website at: <http://www.athleticboard.mt.gov>
- REFERENCES:** Submit three letters of references, in addition to, listing references on the application that can attest to your experience and integrity as a promoter/matchmaker.

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**CURRENT
PICTURE
REQUIRED**

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(Please allow 14 days for processing from the date that the Board receives your complete routine application)

APPLICATION FOR: PROMOTER/MATCHMAKER

(A fee of \$500 must be submitted with application - Club Boxing Promoter \$250)

Social Security Number _____

Full Name _____
Last First Middle

Other Name(s) Known By _____

Gender _____ Date of Birth _____ Foreign ID Number _____

E-mail Address _____

Please indicate you preferred mailing address

____ Home

____ Business

Residential Information

Phone _____

Fax _____

Address _____

Zip Code _____

City, State _____

Business (Present Employer) Information

Phone _____

Fax _____

Address _____

Zip Code _____

City, State _____

Business Name _____

All applicants must answer the following questions.

If you answer "yes", provide a detailed explanation on a separate sheet of paper.

YES NO

1. Do you intend to practice in the State of Montana?
2. Have you ever previously applied for a license to practice in Montana? If yes, give date, and results.
3. Have you ever withdrawn an application for licensure? If yes, please give the state and reasons for withdrawal.
4. Has a licensing agency ever taken adverse or disciplinary action against your license? If yes, attach agency documents filed in the action including all complaints, initiating documents, orders, final orders, stipulations and consent and/or settlement agreements.
5. Have you ever voluntarily surrendered, cancelled, forfeited or failed to renew a license during a disciplinary investigation of your practice, or entered into a consent agreement respecting your license during a disciplinary investigation? If yes, attach a detailed explanation identifying each occasion, the date and the substance of the allegations.
6. Has any legal or disciplinary action been filed against you, which relates to the propriety of, or your fitness to practice this profession (e.g., malpractice, etc.)? If yes, attach a detailed explanation of each instance including the date of claim, name and address of party complaining, name and address of forum or court where claim was filed, docket or claim number and the substance of the allegations.
7. Have you ever been expelled from or asked to resign from any professional organization or been censured by a professional organization of which you were a member? If yes, attach a detailed explanation.
8. Do you have criminal charges pending or have you ever plead guilty, forfeited bond, or been convicted of a crime (Including a plea of no contest or deferred prosecution) whether or not an appeal is pending? You may omit: (1) payment of traffic misdemeanor fines and (2) charges or convictions prior to your 16th birthday. If yes, attach a detailed explanation.
9. Have you any physical or mental condition, which has adversely affected your ability to practice this profession, including but not limited to, a contagious or infectious disease involving serious risk to the public? If yes, attach a detailed explanation.
10. Have you used alcohol or any other mood-altering substance in a manner, which adversely affected your ability to practice this profession? If yes, attach a detailed explanation.
11. Do you currently hold any professional or occupational license in Montana or another state? If yes, provide the following information:

State/Province/Territory	License Number	Date Issued (mm/dd/yyyy)	Is License Current (Yes or No)	Type of License

REFERENCES

List the name, address, and phone number of three (3) individuals that can attest to your experience and integrity as a promoter/matchmaker

Name	Mailing Address	City	State	Zip	Phone (Include area code)

EXPERIENCE & QUALIFICATIONS

(List your experience and qualifications as a promoter/matchmaker)

AFFIDAVIT

I authorize the release of information concerning my education, training, record, character, license history, and competence to practice, by anyone who might possess such information, to the Montana Board of Athletics.

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement or evasive answer to any question may lead to denial of my application or subsequent revocation of license on ethical grounds. I have read and am familiar with the applicable laws of the State of Montana and instructions to applicants for licensure. I accept the rules and procedures outlined in these documents as the basis for my application.

I hereby declare that if a Montana license is issued to me, I agree to conduct myself in accordance with the laws and rules of Montana and the laws and rules regulating Montana Board of Athletics.

Legal Signature of Applicant

Date

State of _____
(County) of _____

Signed and sworn to (or affirmed) before me on _____ by
Month Day Year
(name(s) of person(s) making statement)_____

SEAL

(Signature of notarial officer)

Title (and Rank)

Residing at

My commission expires _____

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SURETY BOND

We, _____

as Principal, and _____
(Name of Surety)

agree to be obligated to the State of Montana in the sum of five thousand dollars (\$5,000), to be paid to the Montana Board of Athletics. The Principal and Surety hereby bind themselves, their successors and assigns, jointly and severally, to the obligation herein.

This Bond is specifically conditioned upon the Principal's faithful compliance with the provisions of Title 23, Chapter 5, Montana Code Annotated, and all administrative rules adopted pursuant to such authority by the Montana Board of Athletics.

The Principal has applied for a promoter's license in accordance with the provisions of Section 23-3-301 through 23-3-611, MCA. If the Principal faithfully complies, at all times, with all of the provisions of Title 23, Chapter 5, Montana Code Annotated, and all administrative rules adopted pursuant to statutory authority by the Montana Board of Athletics, then this obligation shall be void. This Bond shall otherwise remain in full force and effect, and shall be due upon a written finding by the Montana Board of Athletics that the Principal has violated any provision of Title 23, Chapter 5, Montana Code Annotated, or any administrative rule adopted pursuant to statutory authority by the Montana Board of Athletics.

This Bond may be continued by a written continuation certificate executed by the Surety and filed with the Montana Board of Athletics, 301 S Park, 4th Floor, Room 428, PO Box 200513, Helena, Montana, 59620-0513, covering licensing periods subsequent to the periods covered herein.

The Surety, as to future liability, may cancel this Bond only after the current license year or year covered by continuation certificate. Cancellation shall be made by giving written notice by certified mail, addressed to the principal at the above address, and to the Montana Board of Athletics, 301 S Park, 4th Floor, Room 428, PO Box 200513, Helena, Montana, 59620-0513, no later than thirty (30) days prior to the expiration of the current license year. This Bond shall be void as to any liability arising subsequent to the Montana Board of Athletics' receipt of such notice.

This bond shall be in full force and effect from the ____ day of _____, ____ to, _____ inclusive.

THIS CONTRACT HAS BEEN READ BY ME. I UNDERSTAND THE TERMS CONTAINED IN IT, AND I UNDERSTAND THAT IT ESTABLISHES OBLIGATIONS THAT MAY BE ENFORCED BY LAW. I HEREBY SIGN THIS CONTRACT AND THEREBY AGREE TO BE BOUND BY ITS TERMS.

PRINCIPAL

AUTHORIZED SIGNATURE/TITLE OR CAPACITY

DATE SIGNED BY PRINCIPAL

SURETY

AUTHORIZED SIGNATURE/TITLE OR CAPACITY

DATED SIGNED BY SURETY

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**APPLICATION FOR BOARD SANCTION
OF A
PROFESSIONAL OR SEMI-PROFESSIONAL
ATHLETIC EVENT**

(Form must be processed, and the event sanctioned at least 21 days before the event,
and prior to any advertising of the event)

TYPE OF EVENT:

PROFESSIONAL BOXING MATCH

SEMI PROFESSIONAL BOXING MATCH

PROFESSIONAL WRESTLING MATCH

SEMI PROFESSIONAL WRESTLING MATCH

PROMOTER INFORMATION:

BUSINESS NAME _____ MT PROMOTER'S LICENSE # _____

ADDRESS _____
STREET CITY ST ZIP

BUSINESS PHONE _____
Area Code + Number

CONTACT PERSON _____ PHONE _____
Area Code + Number

IS SURETY BOND STILL IN EFFECT? YES NO

*(If you answered NO, you must provide the Board with a surety bond for a minimum amount of \$5,000
before the Board can sanction this event.)*

ONE OF THE FOLLOWING MUST BE RECEIVED IN THE BOARD OFFICE PRIOR TO SANCTIONING.

- certified cashier's check or money order for each purse, payable to each contestant, in an amount not less than the total purse for that contestant, or
- a written statement, waiving such protection, signed by the contestant (waiver forms are included with this application)

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ATHLETIC EVENT INFORMATION

DATE OF WEIGH-IN _____ TIME OF WEIGH-IN _____

LOCATION OF WEIGH-IN _____

ADDRESS _____ PLACE _____

STREET CITY ST ZIP

DATE OF EVENT _____ TIME OF EVENT _____

LOCATION OF EVENT _____ PHONE _____

PLACE

Area Code + Number

ADDRESS _____

STREET

CITY

ST

ZIP

RINGSIDE PHYSICIAN _____ PHONE _____

NAME (SPECIFY MD, DO, PAC, or APRN)

Area Code + Number

ADDRESS _____

STREET

CITY

ST

ZIP

TICKET INFORMATION

TOTAL NUMBER OF TICKETS AVAILABLE FOR SALE # _____

PURCHASE PRICE \$ _____ # _____
\$ _____ # _____
\$ _____ # _____

COMPLIMENTARY \$ _____ # _____
\$ _____ # _____
\$ _____ # _____

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The Montana Board of Athletics, in order to protect the public and contestants, has set forth in the Administrative Rules of Montana 24.117.502 "Prior to issuance of a permit to a licensee to conduct or promote an athletic event, licensee must, at least 21 days prior to the commencement of the athletic event, provide to the board either of the following:

(a) a certified cashier's check or money order for each purse, payable to each contestant not waiving such protection under subsection (b) below, in an amount not less than the total purse to be paid to such contestant; or

(b) a written statement, signed by each contestant for which a check is not provided, waiving protection under subsection (a) above.

WAIVER

I, _____ waive my protection under ARM 24.117.502 to
Print Name

have a certified cashier's check or money order for the amount of my purse, made payable to me,

by the promoter _____.
Print Name

This waiver is in effect for the boxing match to be held on _____.
Month/Day/Year

Signature

Date

Note: Please mail the signed waiver directly to the promoter.
Promoter, please mail a copy of the signed waiver to the Board office.